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POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT

Application Number	10/1714,471
Filing Date	11/15/2003
First Named Inventor	Tianqing He
Title	Device for Rapid Drying
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

 Practitioners at Customer NumberPlace Customer
Number Bar Code
Label here

OR

 Practitioner(s) named below:

Name	Registration Number
Michael E. Mauney	33,731

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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<input type="checkbox"/> Firm or Individual Name			
Address			
Address			
City	State	Zip	
Country			
Telephone	Fax		

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Tianqing He		
Signature	12/09/2003 T&P		
Date	11/14/2003	Telephone	919-875-8371

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

<input type="checkbox"/>	*Total of <u>four</u> forms are submitted.
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This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	10/714,471
Filing Date	11/15/2003
First Named Inventor	Ali Regimand
Title	Device for Rapid Drying
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

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 Practitioner(s) named below:

Name	Registration Number
Michael E. Mauney	33,731

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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Individual Name

Address

Address

City

State

Zip

Country

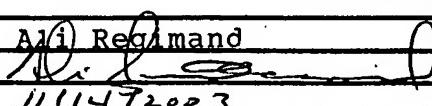
Telephone

Fax

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/06).

SIGNATURE of Applicant or Assignee of Record

Name Ali RegimandSignature Date 11/14/2003Telephone 919-875-8371

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of four forms are submitted.

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	10/714,471
Filing Date	11/15/2003
First Named Inventor	Peter D. Muse
Title	Device for Rapid Drying
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

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Number Bar Code
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 Practitioner(s) named below:

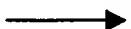
Name	Registration Number
Michael E. Mauney	33,731

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

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OR

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OR

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Individual Name

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Address

City

State

Zip

Country

Telephone

Fax

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name	Peter D. Muse		
Signature			
Date	11-14-2003	Telephone	919-875-8371

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of Four forms are submitted.

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	101714,471
Filing Date	11/15/2003
First Named Inventor	Lawrence H. James
Title	Device for Rapid Drying
Art Unit	
Examiner Name	
Attorney Docket Number	

I hereby appoint:

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OR

 Practitioner(s) named below:

Name	Registration Number
Michael E. Mauney	33,731

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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OR

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OR

 Firm or
Individual Name Address Address City

State

Zip

 Country Telephone

Fax

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name

Lawrence H. James

Signature

Date

11/14/03

Telephone

919 875 8371

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of four forms are submitted.

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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration
Submitted
With Initial
Filing

OR

Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	
First Named Inventor	He, Tianging
COMPLETE IF KNOWN	
Application Number	10/714,471
Filing Date	11/15/2003
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

DEVICE AND METHOD FOR RAPID DRYING OF POROUS MATERIALS

(Title of the Invention)

the specification of which

 is attached hereto**OR** was filed on (MM/DD/YYYY) 11/15/2003 as United States Application Number or PCT InternationalApplication Number 10/714,471 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: Customer Number _____ OR Correspondence address below

Name Michael E. Mauney, Attorney at Law

Address Post Office Box 10266

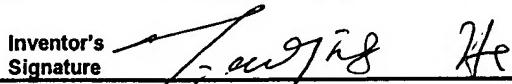
City	Southport	State	NC	ZIP	28461
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Country	USA	Telephone (910) 457-0056	Fax (910) 457-6069
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Tianqing	Family Name or Surname	He
-------------------------------------------	----------	---------------------------	----

Inventor's Signature		Date	11/14/03
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Residence: City	Cary	State	NC	Country	USA	Citizenship	USA
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Mailing Address 103 Canton Court

City	Cary	State	NC	ZIP	27513	Country	USA
------	------	-------	----	-----	-------	---------	-----

NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])	Ali	Family Name or Surname	Regimand
-------------------------------------------	-----	---------------------------	----------

Inventor's Signature		Date	11/14/2003
-------------------------	-------------------------------------------------------------------------------------	------	------------

Residence: City	Raleigh	State	NC	Country	USA	Citizenship	USA
-----------------	---------	-------	----	---------	-----	-------------	-----

Mailing Address 8529 Hawksmoor Drive

City	Raleigh	State	NC	ZIP	27615	Country	USA
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Additional Inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

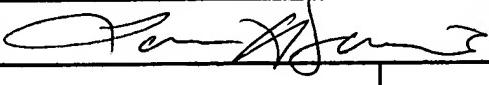
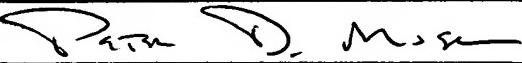


PTO/SB/02A (10-00)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2**

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Lawrence H.		Family Name or Surname James	
Inventor's Signature 		Date 11/14/03	
Residence: City Raleigh	State NC	Country USA	Citizenship USA
Mailing Address 8425 Two Courts Drive			
Mailing Address			
City Raleigh	State NC	ZIP 27613	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Peter D.		Family Name or Surname Muse	
Inventor's Signature 		Date 11-14-2003	
Residence: City Durham	State NC	Country USA	Citizenship USA
Mailing Address 129 Radcliff Circle			
Mailing Address			
City Durham	State NC	ZIP 27713	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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